FORM D

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JAN 0 6 2005

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

THOMSUN FINANCIAL



FORM D

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden

Estimated average burden hours per form 16.00



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEI	VED			

Name of Offering (check if this is an amen	dment and nam	e has changed, and inc	licate change.)		
Private Placement - Common Stocks					
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	⊠Ru	ile 506 Section	4(6) ULOE
Type of Filing:		⊠New Filing			t Jacob Color
	A. BA	SIC IDENTIFICATI	ON DATA		
1. Enter the information requested about the	issuer		<u> </u>	< < J,	AN 0 5 2005
Name of Issuer (check if this is an amendment of Issuer CORP.	ent and name h	nas changed, and indic	ate change.)	Mac.	fin f
Address of Executive Offices	(N	nd Chart City Chata 1	7:- Codo	Tolombon Number (18	Anding Strange (Selfer)
2225 Sheppard Avenue East, Suite 1801, 7		nd Street, City, State, 2	cip code)	Telephone Number (In 416-756-2324	ciuding/Ajear Gode)
Address of Principal Business Operations (N	umber, Street, (City, State, Zip Code)		Telephone Number (Ir	cluding Area Code)
same as above					
Brief Description of Business					ED.E.
Software Developer					
			 _		
Type of Business Organization					JAIN (C.
⊠corporation	∐limited j	partnership, already fo	rmed	other (please	e specify)
business trust	☐ limited]	partnership, to be form	ed		Mychinex
		<u>Month</u>	Year		LINAMENT
Actual or Estimated Date of Incorporation or	Organization:	January	1989	⊠Actual	☐ Estimated
Jurisdiction of Incorporation or Organization:	`	-letter U.S. Postal Serv nada, FN for other fore		for State: Ontario, Cl	N

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

<u>Copies Required</u>: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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	A. BASIC II	DENTIFICATION DATA					
2. Enter the information reque	ested for the following:						
 Each promoter of the is 	suer, if the issuer has been organized	I within the past five years;					
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
• Each executive officer a	and director of corporate issuers and	of corporate general and managing partners of pa	rtnership issuers; and				
Each general and manage	ging partner of partnership issuers.						
Check Box(es)	Promoter	Beneficial Owner	⊠Executive Officer				
That Apply:	Director	General and/or Managing Partner					
Full Name (Last name first, if it Moustafa, Nagy							
Business or Residence Address 78 Forester Crescent, Unionvil	(Number and Street, City, State, Zip lle, Ontario L6C 1V3	Code)					
Check Box(es)	Promoter	Beneficial Owner	Executive Officer				
That Apply:	Director	General and/or Managing Partner					
Full Name (Last name first, if in	ndividual)						
Mahgoub, Hussam	(Number and Street, City, State, Zip	n Codo)					
212 Weldon Avenue, Oakville		p Code)					
Check Box(es)	Promoter	Beneficial Owner	Executive Officer				
that Apply:	Director	General and/or Managing Partner	Zakodan ve em ee.				
Full Name (Last name first, if in							
Hackett, David William Agney	v						
Business or Residence Address 20 Astley Avenue, Toronto, Or	(Number and Street, City, State, Zip ntario, M4W 3B4	Code)					
Check Box(es)	Promoter	Beneficial Owner	Executive Officer				
that Apply:	Director	General and/or Managing Partner					
Full Name (Last name first, if it Keith Powell							
Business or Residence Address 4243 Bridlepath Trail, Mississ	(Number and Street, City, State, Zip auga, Ontario L5L 3K3	Code)					
Check Box(es)	Promoter	Beneficial Owner	☐ Executive Officer				
that Apply:	⊠Director	General and/or Managing Partner					
Full Name (Last name first, if in Stanley Martin David Beck							
Business or Residence Address #500-70 Bond Street, Toronto.	s (Number and Street, City, State, Zip , Ontario M5B 1X3						
Check Box(es)	Promoter	Beneficial Owner	Executive Officer				
that Apply:	Director	General and/or Managing Partner					
Full Name (Last name first, if is Steinman, Mark C.							
29 Woodthrush Court, North Y	s (Number and Street, City, State, Zip York, Ontario M2K 2A9						
Check Box(es)	Promoter	Beneficial Owner					
that Apply:	Director	General and/or Managing Partner					
Full Name (Last name first, if i	ndividual)						
Walton, Charles C.	Olympia de City City City City	(-1-)					
271 Arrowhead Road, Marshfi							
Check Box(es)	Promoter	Beneficial Owner	☐Executive Officer				
that Apply:	∑Director	General and/or Managing Partner					
Full Name (Last name first, if i Shiu, Charles							
	s (Number and Street, City, State, Zip race Bldg D, 6th Floor, Happy Valley						

3. Does the offering permit joint ownership of a single unit?	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?		·			В. І	NFORMA	TION ABO	UT OFFER	ING	·	
3. Does the offering permit joint ownership of a single unit?	3. Does the offering permit joint ownership of a single unit?	1.	Has the issuer so	old, or does th						_	Yes 🗌	No 🛚
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated pagent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States)	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated per agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States) MMD MA PA MNY VA MMI MN CA MTXI Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	2.	What is the min	mum investr	nent that wil	ll be accepte	ed from any	individual?.			No Specif	fied Minimum
remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated progent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States)	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated per agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States) MD MA PA NY VA MI MN CA TXI Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	3.	Does the offerin	g permit join	t ownership	of a single	unit?	••••••			Yes 🛚	No 🗌
(Check "All States" or check individual States)	Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States)	4.	remuneration fo agent of a broke	r solicitation r or dealer re	of purchase: gistered witl	rs in connec h the SEC a	ction with sa nd/or with a	lles of securi	ties in the of es, list the n	ffering. If a person ame of the broker	to be listed is an a or dealer. If more	associated pers than five (5)
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States)	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers - (Check "All States" or check individual States)								<u></u>	. 		
(Check "All States" or check individual States)	(Check "All States" or check individual States)					Street, City	y, State, Zip	Code)				
	Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	Bı	isiness or Residen	ce Address (Number and	Street, City	y, State, Zip	Code)				
Business or Residence Address (Number and Street, City, State, Zip Code)	Name of Associated Broker or Dealer	Bu Na St (C	usiness or Residen ame of Associated ates in Which Per theck "All States"	Broker or Do	Number and ealer as Solicited ividual State	or Intends to	o Solicit Pu	rchasers -			All States	
		Bt Na St (C	usiness or Residen ame of Associated ates in Which Per heck "All States" MD MA	Broker or Doson Listed Haror check ind	Number and ealer as Solicited ividual State	or Intends to	o Solicit Pu	rchasers -			All States	
Name of Associated Broker or Dealer		Bt Na St (C ∑	ame of Associated ates in Which Per Pheck "All States" MD MA Ill Name (Last nar	Broker or Doson Listed Haror check ind	Number and ealer as Solicited ividual State NY lividual)	or Intends to es) ⊠VA	o Solicit Pu ⊠WI	rchasers -			All States	

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE OF PROCI	EEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offering for exchange and already exchanged.		
	Type of Security Debt	Aggregate Offering Price	Amount Already Sold
	Equity	\$0.40 / share	\$2,650,000
	Common ☐ Preferred		, ,
	Convertible Securities (including warrants) Common Stock Warrants	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$	\$2,650,000
	Answer also in Appendix, Column 3, if filing under ULOE.		, ,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		N I Y	Aggregate Dollar Amount
	According to	Number Investors	of Purchases
	Accredited Investors	17	\$2,650,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$2,650,000
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Legal Fees	\boxtimes	\$ 40,000
	Accounting Fees		\$ 10,000
	Sales Commissions (specify finders' fees separately)	. 🖾 	\$ 0,000
	Other Expenses (Identify)		\$ 0,000
	Total		\$ 50,000
	b. Enter the difference between the aggregate offering price given in response to		\$ 2,600,000
	Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer"		<i>₽ 2,</i> 000,000

C. OFFERING PRICE, NUMBER OF INVESTO	RS, EXPENSES AND USE OF PROCEEDS
5. Indicate below the amount of the adjusted gross proceeds to the issuer use proposed to be used for each of the purposes shown. If the amount for an purpose is not known, furnish an estimate and check the box to the left of estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	y the roceeds
	Payment to Officers, Directors, & Affiliates
Salaries and fees Purchase of real estate	Payment To Others
Purchase, rental or leasing and installation of machinery and equipment Construction or leasing of plant buildings and facilities	\$ \$
offering that may be used in exchange for the assets or securities of another is: pursuant to a merger)	suer
Repayment of indebtedness Working capital	\$ <u>\$2,600,000</u>
Other (specify):	
Total Payments Listed (column totals added)	
D. FEDERAL SI The issuer had duly caused this notice to be signed by the undersigned duly at	uthorized person. If this notice is filed under Rule 505, the following
signature constitutes an undertaking by the issuer to furnish to the U.S. Securi information furnished by the issuer to any non-accredited investor pursuant to	
Issuer (Print or Type) DIVERSINET CORP.	Date December 23, 2004
Name of Signer (Print or Type) David Hackett	Title of Signer (Print of Type) CFO
David nackett	Cro
ATTENT	ION

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	E. STATE SIGNATURE
1	and the same and the
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule? Yes No
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
Th	he issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
du	ally authorized person.
Iss	suer (Print or Type) Date December 23, 2004
Na	ame of Signer (Print or Type) Title of Signer (Print or Type)
	David Hackett Chief Financial Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	APPENDIX								
1		2 3 4			5 Disqualification				
		o non-accredited te (Part B-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of i	Type of investor and amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No	Common Stocks and Warrants to Purchase Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	X	2	\$500,000				
СО						1			
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA							_		
KS									
KY									
LA									
ME									
MD		X	Х	1	\$60,000				
МА		Х	X	2	\$54,000				
MI									
MN		X	X	1	\$50,000				

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	APPENDIX									
1		2	3	4				5		
		o non-accredited e (Part B-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)		
MS										
МО										
MT										
NE										
NV										
NH										
NJ										
NM										
NY		х	Х	1	\$100,000					
NC										
ND										
ОН										
ОК										
OR										
PA		Х	Х	2	\$150,000					
RI										
SC										
SD										
TN										
TX		Х	X	1	\$250,000					
UT										
VT										
VA		Х	X	3	\$120,000					
WA										
WV										
WI		Х	X	4	\$813,118					

		AP	PENDIX	·
1	Intend to sell to non-accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)
WY				
PR				